

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of Michigan

***Amount, Duration and Scope of Medical and Remedial Care
Services Provided to the Categorically and Medically Needy***

6. Medical Care Furnished by Practitioners within the Scope of their Practice as Defined by State Law
(continued)

b. Optometry Services:

- i) Covered services as limited by the department, are those provided to individuals under the EPSDT program.

c. Chiropractor Services:

Chiropractic services as limited by the department are those provided to individuals under the EPSDT program.

d. Other Practitioner Services:

~ Certified Nurse Anesthetists (CRNAs)

Services provided by registered nurses certified by the council on Certification of Nurse Anesthetists or re-certified by the Council on Re-certification of Nurse Anesthetists are covered. Services are limited to those provided on an inpatient or outpatient basis and reimbursement is directed through to the provider or the provider's employer.

~ Registered/Licensed Dental Hygienists

Services provided by registered dental hygienists (RDHs) are covered when those services are rendered on behalf of an organization, clinic or group practice. Covered services are limited to those allowed under the RDH's scope of practice as defined by State law.

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: MICHIGAN

***Amount, Duration and Scope of Medical and Remedial Care
Services Provided to the Categorically and Medically Needy***

7. **PHYSICIANS' SERVICES** (same for categorically needy and medically needy clients).

Physicians' services are defined as services provided with the scope of his/her profession by a doctor of medicine or osteopathy licensed under State law where the services are performed:

No payment will be made for services of staff in residence (e.g., interns and residents) or medical staff functioning in an administrative capacity for a hospital, nursing home, or medical care facility, including physician-owners. In relation to outpatient services, physicians' fees for covered services are payable only when such payment does not duplicate payment to the facility.

Physicians' services are covered whether furnished in the office, a patient's home, a hospital, a nursing facility or elsewhere, except that:

- a) Services must be related to either:
 - 1) a diagnosed mental or physical health condition calling for therapeutic management; or
 - 2) an examination to diagnose a mental deficiency or retardation; or
 - 3) family planning;
- b) Physician visits in the nursing home setting are limited to one visit per patient per month; additional visits must be documented as medically necessary;
- c) Speech and/or language evaluations by a physician are limited to a not more than two in a 12 month period unless documented as medically necessary.

Physician services include services of the type which an optometrist is also legally authorized to perform and such services are reimbursed whether furnished by a physician or an optometrist.

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: MICHIGAN

Citation

42 CFR
441.30
AT-78-90

3.1 (f)(1)

Optometric Services

Optometric services (other than those provided under §§435.531 and 436.531) are not now but were previously provided under the plan. Services of the type an optometrist is legally authorized to perform are specifically included in the term "physicians' services" under this plan and are reimbursed whether furnished by a physician or an optometrist.

☒ **YES.**

10/01/74
(TN74-44)

☐ No. The conditions described in the first sentence apply but the term "physicians' services" does not specifically include services of the type an optometrist is legally authorized to perform.

☐ Not applicable. The conditions in the first sentence do not apply.

1903(i)(1) of
the Act, P.L.
99-272
(Section
9507)

(2)

Organ Transplant Procedures

☒ No.

☒ Yes. Similarly situated individuals are treated alike and any restrictions on the facilities that may, or practitioners who may, provide those procedures is consistent with the accessibility of high quality care to individuals eligible for the procedures under this plan. Standards for the coverage of organ transplant procedures are described at ATTACHMENT 3.1-E.

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